Landscape of Plan
Options in

South Carolina
2007



Medicare Advantage Cost Plans and Demonstrations

1-800-MEDICARE TTY 1-877-486-2048 www.medicare.gov



County Abbeville Abbeville Abbeville Abbeville	Organization Name Advantra® Freedom			Monthly Consolidated Premium	Monthly	Annual	Davis		Offers Variable
Abbeville Abbeville Abbeville Abbeville					Monthly	Annual	Davis	_	
Abbeville Abbeville Abbeville Abbeville				Premium	Monthly				
Abbeville Abbeville Abbeville Abbeville				4	,		Drug	Type of	Drug
Abbeville Abbeville Abbeville Abbeville			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
Abbeville Abbeville Abbeville		Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Abbeville Abbeville		Freedom 3 (H0846-006)	PFFS *	\$0.00					
Abbeville	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Abbeville	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Abbeville	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Abbeville	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Abbeville	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Abbeville	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Abbeville	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Abbeville	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Abbeville	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Abbeville	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Abbeville	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Abbeville	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Abbeville	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Abbeville	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Abbeville	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	ψ1σ	Ψΰ	21111011000		
Aiken	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Aiken	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		
Aiken	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00	ψο.σσ	Ψΰ	Buolo		
Aiken	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-002)	Local PPO	\$33.00	\$32.90	\$0	Basic		
Aiken	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-005)	Local PPO	\$50.00	\$37.50	\$0	Basic		<u> </u>
Aiken	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		
Aiken	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		-
Aiken	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		-
Aiken	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	φ29.30	ΦΟ	Dasic		<u> </u>
Aiken	InStil Health Insurance Company	InStil InClaire (14204-002) InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
Aiken	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-001)	Regional PPO	\$121.00	\$53.50	\$0 \$0	Enhanced	Generics	•
Aiken	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *		\$55.50	ΦU	Ennanced	Genencs	<u> </u>
				\$0.00					
Aiken	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					├
Aiken	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Aiken	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	* 00.70	# 400	Fahanad		├
Aiken	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Aiken	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					├
Aiken	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	201.00				├
Aiken	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	Comedea	•
Aiken	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Aiken	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Aiken	WellCare	Duet (H1340-002)	PFFS *	\$0.00					├
Aiken	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Aiken	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Allendale	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Allendale	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Allendale	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Allendale	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	\$41.00	\$37.40	\$0	Enhanced	Generics	•
Allendale	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Allendale	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Allendale	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Allendale	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Allendale	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Allendale	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Allendale	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					1

* Indicates plan do	es not offer Part D drug coverage.								
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
llendale	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
llendale	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
llendale	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
llendale	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
llendale	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
llendale	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
llendale	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
llendale	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
llendale	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
llendale	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
llendale	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	
Inderson	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	Ψ20σ	ΨÜ	21111011000	Contonio	
Inderson	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Inderson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Anderson	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		<u> </u>
Anderson	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00	φυ.υυ	ΦU	Dasic		•
		\ /		· · · · · · · · · · · · · · · · · · ·	£47.00	C O	Di-		—
nderson	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		-
nderson	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
nderson	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
nderson	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Inderson	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Inderson	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Inderson	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Anderson	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Anderson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Inderson	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Inderson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Anderson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Inderson	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Inderson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Inderson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Inderson	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Inderson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Inderson	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.70	ψισσ	Emilanooa		
Inderson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Anderson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		
Anderson	Today's Option	Today's Options Premier Plus (H5421-042)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
					\$44.90	\$0	Ennanced	Genencs	•
nderson	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
nderson	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
nderson	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
nderson	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Inderson	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Inderson	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Inderson	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Inderson	WellCare	Summit (H1340-010)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
Bamberg	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Bamberg	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Bamberg	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Bamberg	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
ranibery	' '	InStil InCare (H4204-022)	PFFS *	\$27.00	İ				İ
Bamberg	InStil Health Insurance Company								1
Bamberg			Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Bamberg Bamberg	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO Regional PPO		\$39.90 \$53.50			Generics	•
Bamberg			Regional PPO Regional PPO PFFS *	\$53.00 \$121.00 \$81.40	\$39.90 \$53.50	\$0 \$0	Basic Enhanced	Generics	

^ Indicates plan do	oes not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated	Manuallala	0	D	T 6	Variable
			Towns of Marillanes	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Туре	Offered in the Gap	
Bamberg	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bamberg	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Bamberg	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	# 04.00	•	.		
Bamberg	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	Commission	•
Bamberg	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Bamberg	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	20.00	•	- ·		
Barnwell	ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Barnwell	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Barnwell	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Barnwell	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Barnwell	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	# 00.00	•	<u> </u>		
Barnwell	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic	Commission	•
Barnwell	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Barnwell	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	# 00 7 0	# 400			
Barnwell	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Barnwell	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Barnwell	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00		-			
Barnwell	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	0 '	•
Barnwell	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Barnwell	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00		-			
Beaufort	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic	0 '	•
Beaufort	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Beaufort	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	\$41.00	\$37.40	\$0	Enhanced	Generics	•
Beaufort	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Beaufort	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Beaufort	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Beaufort	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Beaufort	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00					
Beaufort	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Beaufort	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Beaufort	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Beaufort	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Beaufort	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Beaufort	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	221.22	-			
Beaufort	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Beaufort	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Beaufort	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Berkeley	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	20.00	•			
Berkeley	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic	0 1	•
Berkeley	Arcadian Health Plan	Charleston - Plus (H5783-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Berkeley	Arcadian Health Plan	Charleston - Premier (H5783-003)	Local HMO	\$38.00	\$36.80	\$0	Enhanced	Generics	•
Berkeley	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Berkeley	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Berkeley	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Berkeley	InStil Health Insurance Company	InStil InCare (H4204-022)	PFFS *	\$27.00		-			
Berkeley	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Berkeley	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Berkeley	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Berkeley	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Berkeley	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Berkeley	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Berkeley	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00				ļ	
Berkeley	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	ļ.,	<u> </u>			
Berkeley	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•

indicates plan do	pes not offer Part D drug coverage.			Manualists.					066
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Berkeley	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Berkeley	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Berkeley	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Berkeley	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Berkeley	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Calhoun	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Calhoun	Advantra® Freedom	Freedom 5 (H5227-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Calhoun	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Calhoun	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Calhoun	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00					
Calhoun	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Calhoun	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Calhoun	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Calhoun	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Calhoun	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Calhoun	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Calhoun	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Calhoun	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Calhoun	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Calhoun	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Calhoun	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Calhoun	Today's Option	Today's Options Premier (H5421-039)	PFFS*	\$0.00	Ψ20.70	Ψισσ	Limanood		
Calhoun	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Calhoun	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		
Calhoun	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	- :
Calhoun	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	\$ 44 .90	ΦU	Ellianced	Genencs	•
Calhoun	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		
Calhoun Calhoun		SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	\$11.00	\$0	Ennanced		•
	Unicare Life & Health Ins. Company Unicare Life & Health Ins. Company	, , ,	PFFS		\$28.70	\$0	Enhanced	Generics	
Calhoun		SecurityChoice Enhanced Plus (H0540-032)		\$56.00	\$28.70	\$0	Ennanced	Genencs	•
Charleston	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	• • • • •		<u> </u>		ļ
Charleston	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic	Canarias	•
Charleston	Arcadian Health Plan	Charleston - Plus (H5783-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Charleston	Arcadian Health Plan	Charleston - Premier (H5783-003)	Local HMO	\$38.00	\$36.80	\$0	Enhanced	Generics	•
Charleston	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Charleston	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Charleston	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Charleston	InStil Health Insurance Company	InStil InCare (H4204-022)	PFFS *	\$27.00	# 00.00		<u> </u>		
Charleston	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Charleston	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Charleston	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Charleston	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Charleston	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Charleston	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Charleston	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Charleston	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Charleston	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Charleston	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Charleston	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Charleston	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Charleston	WellCare	Concert (H1340-016)	PFFS	\$109.00	\$49.70	\$0	Enhanced		•
Cherokee	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Cherokee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Cherokee	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					

indicates plan de	pes not offer Part D drug coverage.			Monthly					Offers
				Monthly					
				Consolidated				T (Variable
			T 684 11	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Cherokee	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Cherokee	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Cherokee	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Cherokee	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Cherokee	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Cherokee	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Cherokee	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Cherokee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Cherokee	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Cherokee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Cherokee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Cherokee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Cherokee	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Cherokee	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Cherokee	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Cherokee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Cherokee	Today's Option	Today's Options Value (H5421-035)	PFFS*	\$12.00					
Cherokee	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Cherokee	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Cherokee	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	
Cherokee	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	Ψ11.00	ΨΟ	Emilanood	Continue	,
Chester	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Chester	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Chester	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Chester	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Chester	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	\$24.00	ΦΟ	Ellianceu		•
Chester	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
Chester	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-001)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	\$55.50	ΦU	Ennanced	Genetics	•
Chester	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Fahanaad		
Chester			PFFS *	\$48.00	\$28.70	\$100	Enhanced		•
Chester	Today's Option	Today's Options Value (H5421-032)							
Chester	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00 \$80.00	#04.00	C O	Di-		
Chester	Today's Option	Today's Options Value Plus (H5421-040)			\$31.90	\$0	Basic	0 '	•
Chester	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Chester	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Chesterfield	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Chesterfield	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Chesterfield	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Chesterfield	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Chesterfield	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Chesterfield	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Chesterfield	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00					
Chesterfield	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Chesterfield	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Chesterfield	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Chesterfield	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Chesterfield	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Chesterfield	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Chesterfield	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Chesterfield	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Clarendon	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Clarendon	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Clarendon	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00					
Clarendon	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
			•						

Part Part	^ Indicates plan do	es not offer Part D drug coverage.								011
Particular Name Particular					Monthly					Offers
Description Park Farms Pa						Manualists.	0	Down	T 6	
County Opgrafetor Name Plant Name Pl				T (11 !!		,		3	J.	
Example Exam		0	DI N		,	5			3	
Parameten Para									Offered in the Gap	
Camendon India Health Insurance Company India InChance Option Regional IPPO S53.00 \$38.00 \$0 Basic • Regional IPPO Regional IPPO \$12.00 \$35.00 \$30 Basic • Regional IPPO \$12.00 \$35.00 \$30 Basic • Regional IPPO \$12.00 \$35.00 \$30 Berhanced Generics \$12.00 \$1		1 /			*					
Dist Health Insurance Company InSil InCase (H050-003) Report (R5550-002) R5550										
InStill Health Insurance Company						\$39.90	\$0	Basic		•
Sterm Optima Sterm Optima Sterm Optima Half-Sterm Sterm St			1			A 50.50	•		Commission	
Sterring Life Insurance Congany Sterling Quiton InstSt006-010 PFFS \$28.70 \$28.71 \$1.00						\$53.50	\$0	Enhanced	Generics	•
Today's Option						#00 7 0	# 400			
Clarendon Today's Option Today's Option Premier (H6421-037) PFFS \$36.00						\$28.70	\$100	Ennanced		•
Today's Option										
Calendrom Today's Option Today's Options Permier Piles (19521-043) PFFS \$80.00 \$44.90 \$0 Enhanced \$0.00						A 04.00	•	- ·		
Discretion UniCare Save Well - Plant III (17728-033) MSA.* \$0.00									0 1	
Colleton Advantate Preedom Freedom Fre						\$44.90	\$0	Enhanced	Generics	•
Colleton										
Colleton Arcadian Health Plan Charleston - Pius (19578-002) Local HMO \$9.0.0 \$0.00 \$0.0 Enhanced Generics Colleton Arcadian Health Plan Charleston - Pius (19578-003) Local HMO \$98.00 \$9.00 \$0.00 \$0.00 Enhanced Generics Colleton Humana Insurance Company HumanaChoice/PFC PFO R6826-004 (R6826-004) Regional PFO \$81.00 \$29.30 \$0.00 Enhanced Cenerics Colleton Humana Insurance Company Humana Gold Choice PFFS H1904-018 (H1904-018) PFFS \$89.00 \$22.60 \$0.00 Enhanced Cenerics Colleton Humana Insurance Company Humana Gold Choice PFFS H1904-226 (H1904-226) PFFS \$19.00 \$24.60 \$0.00 Enhanced Cenerics Colleton InSiH Health Insurance Company InSiH InChoice Option I - Regional (R6553-001) Regional PFO \$32.00 \$39.90 S0.00 S										
Colleton Arcadian Health Plan Charleston - Premier (145783-003) Local HMO \$385.00 \$36.80 \$30 Enhanced Censelics		, ,		_	· · · · · · · · · · · · · · · · · · ·					
Deleton Humana Insurance Company Humana Cholice/PPO PPO R5826:004 (R5826:004) Regional PPO \$81.00 \$22.90 \$0 Enhanced •										
Colleton Humana Insurance Company Humana Gold Choice PFFS H1604-26 (H1604-018) PFFS \$89,00 \$22,80 \$0 Enhanced • Colleton Humana Insurance Company Humana Gold Choice PFFS H1604-226 (H1604-026) PFFS \$10,00 \$24,60 \$0 Enhanced • Colleton InSili Health Insurance Company InSili InChare (H4204-022) PFFS \$27,00 \$39,90 \$0 Basic • Colleton InSili Health Insurance Company InSili InChoice Option I - Regional (R5553-001) Regional PPO \$121,00 \$53,50 \$0 Enhanced Sili InChoice Option I - Regional (R5553-002) Regional PPO \$121,00 \$53,50 \$0 Enhanced Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,20 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,00 Sili InChoice Option I - Regional (R5553-002) PFFS \$149,00 Sili InChoice Option I - Regional (R5553-002) R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InChoice Option I - R510 Sili InCho									Generics	
Dolleton Humana Insurance Company Humana Gold Choice PFFS H1804-226 H1804-226 PFFS \$10,00 \$24.60 \$9 Enhanced Enh										•
Dolleton InStil Health Insurance Company InStil InCare (H4204-022) PFFS \$27.00		1 /								
Colleton InStil Health Insurance Company InStil InChoice Option I - Regional (R5653-001) Regional PPO \$53.00 \$39.90 \$90 Basic Colleton InStil Health Insurance Company InStil InChoice Option II - Regional (R5653-002) Regional PPO \$53.00 \$30.50 \$90 Enhanced Cenetics Colleton Sierra Optima Sierra						\$24.60	\$0	Enhanced		•
Colleton InStill Health Insurance Company InStill InChoice Option II - Regional (R6553-002) Regional PPO \$12.1.0.0 \$53.5.0 \$0. Enhanced Genetics Colleton Siera Optima	Colleton									
Colleton Sierra Optima Sierra Optima (H4449-006) PFFS \$814.0	Colleton						\$0	Basic		•
Colleton Sierra Optima Siera Optima Si	Colleton					\$53.50	\$0	Enhanced	Generics	•
Sterling Life Insurance Company Sterling Option I (H5006-011) PFFS \$9,00	Colleton		Sierra Optima (H4449-006)							
Sterling Life Insurance Company Sterling Option II (H5000-6101) PFFS \$28.70	Colleton	Sierra Optima	Sierra Optima Plus (H4449-003)							
Colleton Today's Option Today's Option Today's Option Today's Options Value (H5421-035) PFFS \$12.00	Colleton	Sterling Life Insurance Company	Sterling Option I (H5006-011)							
Colleton Today's Option Today's Option Today's Options Premier (H5421-037) PFFS \$35.00	Colleton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Colleton Today's Option Today's Options Value Plus (H5421-042) PFFS \$44.00 \$31.90 \$0 Basic • Colleton Today's Option Today's Options Premier Plus (H5421-043) PFFS \$80.00 \$44.90 \$0 Enhanced Generics • Colleton UniCare Save Well - Plan (H7428-001) MSA \$0.00 S44.90 \$0 Enhanced Generics • Colleton UniCare Save Well - Plan (H7428-001) MSA \$0.00 S44.90 \$0 Enhanced Generics • Colleton UniCare Save Well - Plan (H7428-001) MSA \$0.00 S44.90 \$0 Enhanced Save Well - Plan (H7428-001) PFFS \$0.00 \$0.00 \$0 S0.00 S0 Basic • Colleton Mumana Insurance Company Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$0.00 \$0.00 \$0.00 S0 Basic • Colleton Mumana Insurance Company Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$9.00 \$22.80 \$0 Enhanced • Colleton Mumana Insurance Company Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$9.00 \$22.80 \$0 Enhanced • Colleton Mumana Insurance Company InStil InChoice Option I - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0 Basic • Colleton Mumana Insurance Company InStil InChoice Option I - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0 Basic • Colleton Mumana Insurance Company InStil InChoice Option I - Regional (R5553-002) Regional PPO \$12.10 \$53.50 \$0 Enhanced Fenerics Enhanced Fenerics Enhanced Fenerics Fenerics Enhanced Fenerics Fener	Colleton	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Colleton Today's Option Today's Options Premier Plus (H5421-043) PFFS \$80.00 \$44.90 \$0 Enhanced Genetics	Colleton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Colletion	Colleton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Darlington ANY, ANY, ANY PLAN ANY, ANY, ANY Plan IV (H5820-004) PFFS \$0.00 \$0.00 \$0.00 Basic • Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$89.00 \$22.80 \$0.00 Basic • Darlington Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$89.00 \$22.80 \$0.00 Basic • Darlington Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$109.00 \$22.80 \$0.00 Basic • Darlington Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$109.00 \$24.60 \$0.00 Basic • Darlington InStil Health Insurance Company InStil InChoice Option I - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0.00 Basic • Darlington InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0.00 Basic • Darlington InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0.00 Basic • Darlington InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-001) Regional PPO \$52.00 \$39.90 \$0.00 Basic • Darlington InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-002) Regional PPO \$52.00 \$39.90 \$0.00 Basic • Darlington Sterring Life Insurance Company Sterring Option II (H5006-010) PFFS \$22.8.70 \$28.70 \$28.70 \$100 Enhanced • Darlington Today's Option Today's Option Sterling H18421-032) PFFS \$48.00 Darlington Today's Option Today's Option Premier (H5421-034) PFFS \$80.00 \$31.90 \$0.00 Basic • Darlington Today's Option Today's Option Premier (H5421-040) PFFS \$80.00 \$31.90 \$0.00 Basic • Darlington Today's Option Today's Option Premier (H5421-041) PFFS \$80.00 \$0.00 \$0.00 Basic • Darlington Today's Option Premier (Plus (H5420-04)) PFFS \$90.00 \$0.00 \$0.00 Basic • Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$9	Colleton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Darlington Humana Insurance Company Humana ChoicePPO PPO R5826-004 (R5826-004) Regional PPO \$81.00 \$29.30 \$0 Basic Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$89.00 \$22.80 \$0 Enhanced • Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$109.00 \$24.60 \$0 Enhanced • Darlington InStil Health Insurance Company InStil InCare (H204-003) Regional PPO \$53.00 \$39.90 \$0 Basic Darlington InStil Health Insurance Company InStil InCare (H204-003) PFFS \$610.0	Colleton	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Darlington Humana Insurance Company Humana ChoicePPO PPO R5826-004 (R5826-004) Regional PPO \$81.00 \$29.30 \$0 Basic Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$89.00 \$22.80 \$0 Enhanced • Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$109.00 \$24.60 \$0 Enhanced • Darlington InStil Health Insurance Company InStil InCare (H204-003) Regional PPO \$53.00 \$39.90 \$0 Basic • Darlington InStil Health Insurance Company InStil InCare (H204-003) PFFS \$610.0	Darlington	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$109.00 \$24.60 \$0 Enhanced •	Darlington	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Darlington Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$109.00 \$24.60 \$0 Enhanced •	Darlington	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Darlington InStil Health Insurance Company InStil InChoice Option I - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0 Basic •	Darlington	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Darlington InStil Health Insurance Company InStil InCare (H4204-003) PFFS * \$61.00 S63.50 S0 Enhanced Generics Serra Optima Sierra Optim	Darlington	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Darlington InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-002) Regional PPO \$121.00 \$53.50 \$0 Enhanced Generics • Darlington Sierra Optima Sterling Option II (H5006-010) PFFS \$218.20 \$28.70 \$100 Enhanced • Darlington Today's Option Today's Options Value (H5421-032) PFFS \$48.00	Darlington				\$61.00					
Darlington Sierra Optima Sierra Optima Sierra Optima (H4449-007) PFFS \$218.20 Sierra Optima (H4449-007) PFFS \$28.70 \$28.70 \$100 Enhanced • Darlington Sterling Life Insurance Company Sterling Option I (H5006-010) PFFS \$28.70 \$28.70 \$100 Enhanced • Darlington Today's Option Today's Option Today's Option Today's Option Premier (H5421-034) PFFS \$72.00 Darlington Today's Option Today's Option Premier (H5421-040) PFFS \$80.00 \$31.90 \$0 Basic • Darlington Today's Option Today's Option Premier Plus (H5421-040) PFFS \$80.00 \$31.90 \$0 Basic • Darlington Today's Option Today's Option Premier Plus (H5421-041) PFFS \$117.00 \$44.90 \$0 Enhanced Generics • Darlington Unicare Save Well - Plan III (H7289-003) MSA \$0.00 Darlington Darlington MSA \$0.00 Darlington Darlington MSA \$0.00 Darlington Darlington MSA \$0.00 Darlington Darlington Darlington MSA \$0.00 Darlington	Darlington			Regional PPO		\$53.50	\$0	Enhanced	Generics	•
Darlington Sterling Life Insurance Company Sterling Option II (H5006-010) PFFS \$28.70 \$100 Enhanced •	Darlington									
Darlington Today's Option Today's Options Value (H5421-032) PFFS * \$48.00	Darlington					\$28.70	\$100	Enhanced		•
Darlington Today's Option Today's Options Premier (H5421-034) PFFS \$72.00 Save Value Plus (H5421-040) PFFS \$80.00 \$31.90 \$0 Basic •	Darlington									
Darlington Today's Option Today's Options Value Plus (H5421-040) PFFS \$80.00 \$31.90 \$0 Basic •			, , , , , ,							
Darlington Today's Option Today's Options Premier Plus (H5421-041) PFFS \$117.00 \$44.90 \$0 Enhanced Generics	Darlington					\$31.90	\$0	Basic		•
Darlington UniCare Save Well - Plan III (H7289-003) MSA * \$0.00 \$0.00 \$0.00 \$0.00									Generics	
ANY, ANY, ANY PLAN										
Humana Insurance Company Humana ChoicePPO PPO R5826-004 (R5826-004) Regional PPO \$81.00 \$29.30 \$0 Basic •	Dillon					\$0.00	\$0	Basic		•
Dillon Humana Insurance Company Humana Gold Choice PFFS H1804-018 (H1804-018) PFFS \$89.00 \$22.80 \$0 Enhanced •									1	
Dillon Humana Insurance Company Humana Gold Choice PFFS H1804-226 (H1804-226) PFFS \$109.00 \$24.60 \$0 Enhanced • Dillon InStil Health Insurance Company InStil InChoice Option I - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0 Basic • Dillon InStil Health Insurance Company InStil InCare (H4204-003) PFFS * \$61.00 \$ Dillon InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-002) Regional PPO \$121.00 \$53.50 \$0 Enhanced Generics • Dillon Sierra Optima Sierra Optima (H4449-007) PFFS * \$218.20										
Dillon InStil Health Insurance Company InStil InChoice Option I - Regional (R5553-001) Regional PPO \$53.00 \$39.90 \$0 Basic • Dillon InStil Health Insurance Company InStil InCare (H4204-003) PFFS * \$61.00 Dillon InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-002) Regional PPO \$121.00 \$53.50 \$0 Enhanced Generics • Dillon Sierra Optima Sierra Optima (H4449-007) PFFS * \$218.20									1	
Dillon InStil Health Insurance Company InStil InCare (H4204-003) PFFS * \$61.00 Dillon InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-002) Regional PPO \$121.00 \$53.50 \$0 Enhanced Generics • Dillon Sierra Optima Sierra Optima (H4449-007) PFFS * \$218.20									1	
Dillon InStil Health Insurance Company InStil InChoice Option II - Regional (R5553-002) Regional PPO \$121.00 \$53.50 \$0 Enhanced Generics • Dillon Sierra Optima Sierra Optima (H4449-007) PFFS * \$218.20						ψ00.00	ΨΟ	Dasio		
Dillon Sierra Optima Sierra Optima (H4449-007) PFFS * \$218.20			1			\$53.50	\$0	Enhanced	Generics	
						φυσ.υυ	φυ	Lillanced	Geneura	_
	Dillon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•

indicates plan doe	es not offer Part D drug coverage.			Manuallah .					066
				Monthly					Offers
				Consolidated	Manuallala		Down	T 6	Variable
			Town of Madiana	Premium	Monthly	Annual	Drug	Type of	Drug
•		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan PFFS *	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Dillon	Today's Option	Today's Options Value (H5421-032)		\$48.00					
Dillon	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	DO1 00				
Dillon	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic	0 1	•
Dillon	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Dillon	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Dorchester	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00	00.00				
Dorchester	ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic	Conorino	•
Dorchester	Arcadian Health Plan	Charleston - Plus (H5783-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Dorchester	Arcadian Health Plan	Charleston - Premier (H5783-003)	Local HMO	\$38.00	\$36.80	\$0	Enhanced	Generics	•
Dorchester	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Dorchester	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Dorchester	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Dorchester	InStil Health Insurance Company	InStil InCare (H4204-022)	PFFS *	\$27.00	#00.00	C O	D		
Dorchester	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic	Commission	•
Dorchester	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Dorchester	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Dorchester	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Dorchester	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Dorchester	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Dorchester	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Dorchester	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Dorchester	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Dorchester	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Dorchester	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Dorchester	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Edgefield	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Edgefield	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Edgefield	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Edgefield	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Edgefield	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Edgefield	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Edgefield	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Edgefield	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Edgefield	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Edgefield	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Edgefield	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Edgefield	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Edgefield	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Edgefield	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Edgefield	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Edgefield	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00					
Edgefield	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Edgefield	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		•
Edgefield	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Edgefield	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Edgefield	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00	***		 		
Edgefield	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Edgefield	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	222 = 6		 		
Edgefield	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Fairfield	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00		L .	<u> </u>		
Fairfield	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Fairfield	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		•
Fairfield	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Fairfield	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		•

1 Indicates plan does r	not offer Part D drug coverage.								Off
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
		a	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Fairfield	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Fairfield	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Fairfield	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Fairfield	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Fairfield	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Fairfield	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Fairfield	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Fairfield	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Fairfield	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Fairfield	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Fairfield	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Fairfield	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Fairfield	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Fairfield	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Fairfield	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Fairfield	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Fairfield	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Fairfield	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Fairfield	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Fairfield	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Fairfield	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Florence	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Florence	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-003)	Local PPO	\$89.00	\$35.80	\$0	Basic		•
Florence	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-006)	Local PPO	\$110.00	\$40.40	\$0	Basic		•
Florence	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		
Florence	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		
Florence	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Florence	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
Florence	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	φοσίου	Ψ.	240.0		
Florence	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	· •
Florence	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	ψ00.00	ΨΟ	Liliancea	Generies	
Florence	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Florence	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Florence	Today's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	Ψ20.70	Ψ100	Lillanceu		
Florence	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Florence	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
Florence	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	
Florence	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	φ44.90	ΨΟ	Ellianceu	Generics	
Florence	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Georgetown	ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		
Georgetown	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0 \$0	Basic		
	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$29.30	\$0	Enhanced		├
Georgetown Georgetown	Humana Insurance Company	Humana Gold Choice PFFS H1804-216 (H1804-216)	PFFS	\$109.00	\$24.60	\$0	Enhanced		<u> </u>
	. ,	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Georgetown	InStil Health Insurance Company		PFFS *		\$39.90	φU	Dasic		•
Georgetown	InStill Health Insurance Company	InStil InCare (H4204-003)		\$61.00	\$53.50	¢∩.	Enhance-	Conorino	
Georgetown	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO PFFS *	\$121.00		\$0	Enhanced	Generics	•
Georgetown	Sierra Optima	Sierra Optima (H4449-007)		\$218.20					-
Georgetown	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	#00 70	M400	E.L.		
Georgetown	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Georgetown	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00			-		
Georgetown	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	Aa (-			
Georgetown	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
<u> </u>			DEEC	L C117 OO		• av		Generics	•
Georgetown Georgetown	Today's Option UniCare	Today's Options Premier Plus (H5421-041) Save Well - Plan III (H7289-003)	PFFS MSA *	\$117.00 \$0.00	\$44.90	\$0	Enhanced	Genencs	•

indicates plan doc	s not offer Part D drug coverage.			Manuallah .					066
				Monthly					Offers
				Consolidated	Manuallala	0	Down	T	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Greenville	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Greenville	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Greenville	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Greenville	Arcadian Health Plan	Greenville - Plus (H5783-006)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Greenville	Arcadian Health Plan	Greenville - Premier (H5783-007)	Local HMO	\$21.00	\$20.00	\$0	Enhanced	Generics	•
Greenville	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		•
Greenville	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Greenville	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		•
Greenville	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Greenville	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Greenville	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Greenville	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Greenville	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Greenville	Carolina Medicare Prime	Carolina Medicare Prime 15 (H4208-002)	Local HMO	\$0.00	\$0.00	\$265	Basic		•
Greenville	Carolina Medicare Prime	Carolina Medicare Prime 15 Plus (H4208-009)	Local HMO	\$15.60	\$15.60	\$0	Enhanced	Generics	•
Greenville	Carolina Medicare Prime	Carolina Medicare Prime 10 (H4208-001)	Local HMO	\$35.30	\$28.50	\$265	Basic		•
Greenville	Carolina Medicare Prime	Carolina Medicare Prime 10 Plus (H4208-008)	Local HMO	\$50.90	\$44.10	\$0	Enhanced	Generics	•
Greenville	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Greenville	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Greenville	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Greenville	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Greenville	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Greenville	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Greenville	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Greenville	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
		,		,					
Greenville	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Greenville	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Greenville	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Greenville	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Greenville	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.7 0	ψ.σσ	21111011000		<u> </u>
Greenville	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Greenville	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Greenville	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Greenville	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	Ψ11.00	ΨΟ	Emilanoca	Generies	
Greenville	WellCare	Duet (H1340-002)	PFFS *	\$0.00					1
Greenville	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Greenville	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Greenwood	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	Ψ-0.00	ΨΟ	Lilianoca		
Greenwood	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		
Greenwood	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00	ψυ.υυ	υψ	Dasic	 	
Greenwood	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced	1	
Greenwood	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		
Greenwood	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic	1	•
Greenwood	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	Ψ23.30	Ψυ	Dasic	 	<u> </u>
Greenwood	InStil Health Insurance Company InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Greenwood	InStil Health Insurance Company InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
		SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$121.00	φου.ου	Φυ	Ellianced	Generics	-
Greenwood	SecureHorizons MedicareDirect	,	PFFS *	\$0.00		-			
Greenwood	Sierra Optima	Sierra Optima (H4449-006)				-			
Greenwood	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20	#00.70	£400	Enhance !	 	
Greenwood	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	1	•
Greenwood	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Greenwood	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	00/ 00				
Greenwood	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•

^ Indicates plan doe	es not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Greenwood	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Greenwood	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Greenwood	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Greenwood	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Greenwood	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Greenwood	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Hampton	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Hampton	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Hampton	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Hampton	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Hampton	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Hampton	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00					
Hampton	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Hampton	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Hampton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Hampton	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00		·			
Hampton	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Hampton	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Hampton	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Hampton	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	******	7-			
Horry	ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Horry	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Horry	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Horry	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Horry	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
Horry	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	ψ00.00	ΨΟ	Dasic		
Horry	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Horry	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	ψ33.30	ΨΟ	Lilianceu	Generics	_
Horry	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Horry	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
Horry	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00	Ψ20.70	Ψ100	Lilianceu		•
Horry	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Horry	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
Horry	Today's Option	Today's Options Premier Plus (H5421-040)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Horry	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	φ44.90	φ0	Ellianceu	Generics	•
Horry	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
•	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		
Jasper	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Jasper	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	\$41.00	\$37.40	\$0	Enhanced	Generics	
Jasper	Ŭ							Generics	•
Jasper	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Jasper	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Jasper	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Jasper	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Jasper	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00		•			
Jasper	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Jasper	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Jasper	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00		A	<u> </u>		
Jasper	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	ļ	•
Jasper	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00				ļ	
Jasper	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00				ļ	
Jasper	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Jasper	Today's Option Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$31.90 \$44.90	\$0 \$0	Basic Enhanced	Generics	•
	Today's Option	, , , , , , , , , , , , , , , , , , , ,						Generics	

County				Monthly					Offers
County									Mantalala
County				Consolidated	NA Al- l	A	D	T	Variable
County			Towns of Marillanes	Premium	Monthly	Annual	Drug	Type of	Drug
County		DI N	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Kershaw	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Kershaw	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Kershaw	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Kershaw	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Kershaw	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Kershaw	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Kershaw	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Kershaw	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Kershaw	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Kershaw	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Kershaw	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Kershaw	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Kershaw	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Kershaw	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Kershaw	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Kershaw	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
_ancaster	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
_ancaster	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		
_ancaster	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		
_ancaster	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
_ancaster	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
_ancaster	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	Ψ00.00	ΨΟ	Buoio		
_ancaster	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
_ancaster	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	ψ33.30	ΨΟ	Lillanceu	Generies	
_ancaster	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
_ancaster _ancaster	Todav's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	φ20.7U	\$100	Ellianced		─ •
_ancaster	Today's Option	Today's Options Premier (H5421-034)	PFFS*	\$72.00					
	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		
_ancaster	Today's Option		PFFS	\$117.00	\$44.90	\$0	Enhanced	Comorino	•
_ancaster	, ,	Today's Options Premier Plus (H5421-041)	MSA *		\$44.90	Φ0	Ennanced	Generics	•
_ancaster	UniCare	Save Well - Plan III (H7289-003)		\$0.00					
_aurens	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					├
_aurens	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00		•			⊢—
_aurens	ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
_aurens	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		•
_aurens	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
_aurens	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		•
_aurens	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
_aurens	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
_aurens	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
_aurens	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
_aurens	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
_aurens	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
_aurens	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
_aurens	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
_aurens	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
_aurens	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
_aurens	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
_aurens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
_aurens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
_aurens	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
_aurens	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
_aurens	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
_aurens	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
_aurens	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00	Ψ20.70	Ψίου			├

^ Indicates plan doe	es not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated	Manadala	0	Down	T 6	Variable
			T (14 !!	Premium	Monthly	Annual	Drug	Type of	Drug
		a	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Laurens	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00			 	ļ	
Laurens	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		•
Laurens	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Laurens	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00		_	_		
Laurens	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00			_		
Laurens	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Laurens	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	<u> </u>	<u> </u>	<u> </u>		
Laurens	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Lee	Aetna Medicare	Aetna Medicare Open Plan (H5736-002)	PFFS	\$80.00	\$21.80	\$265	Basic		
Lee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Lee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Lee	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Lee	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Lee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Lee	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	<u> </u>	<u> </u>	<u> </u>		
Lee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Lee	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	<u> </u>	<u> </u>	<u> </u>		
Lee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lee	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Lee	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Lee	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Lee	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Lee	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00		<u> </u>			
Lexington	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Lexington	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Lexington	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00					
Lexington	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-002)	Local PPO	\$33.00	\$32.90	\$0	Basic		•
Lexington	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-005)	Local PPO	\$50.00	\$37.50	\$0	Basic		•
Lexington	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Lexington	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Lexington	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Lexington	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Lexington	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Lexington	Carolina Medicare Prime	Carolina Medicare Prime 15 (H4208-002)	Local HMO	\$0.00	\$0.00	\$265	Basic		•
Lexington	Carolina Medicare Prime	Carolina Medicare Prime 15 Plus (H4208-009)	Local HMO	\$15.60	\$15.60	\$0	Enhanced	Generics	•
Lexington	Carolina Medicare Prime	Carolina Medicare Prime 10 (H4208-001)	Local HMO	\$35.30	\$28.50	\$265	Basic		•
Lexington	Carolina Medicare Prime	Carolina Medicare Prime 10 Plus (H4208-008)	Local HMO	\$50.90	\$44.10	\$0	Enhanced	Generics	•
Lexington	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Lexington	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Lexington	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Lexington	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00		<u> </u>			
Lexington	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Lexington	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Lexington	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Lexington	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Lexington	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Lexington	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lexington	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Lexington	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Lexington	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Lexington	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00		1		1	
Lexington	Unicale	Jave Well - 1 Iail II (11/203-002)							
Lexington Lexington	WellCare	Duet (H1340-002)	PFFS *	\$0.00				<u> </u>	

mulcates plan due	es not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated			_		Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Lexington	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Marion	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Marion	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Marion	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Marion	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Marion	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Marion	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Marion	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00					
Marion	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Marion	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Marion	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Marion	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Marion	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Marion	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Marion	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Marion	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Marion	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00		* -			
Marlboro	ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Marlboro	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Marlboro	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$22.80	\$0	Enhanced		•
Marlboro	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Marlboro	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Marlboro	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	ψ00.00	ΨΟ	Dasic		Ť
Marlboro	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Marlboro	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	ψ00.00	ΨΟ	Lilianoca	GCHCHGS	-
Marlboro	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Marlboro	Today's Option	Today's Options Value (H5421-032)	PFFS*	\$48.00	Ψ20.70	Ψ100	Lillanceu		•
Marlboro	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00					
Marlboro	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0	Basic		•
Marlboro	Today's Option	Today's Options Premier Plus (H5421-040)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Marlboro	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00	φ44.90	ΨΟ	Ellianceu	Genencs	•
McCormick	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
McCormick	Advantra® Freedom Advantra® Freedom	Freedom 2 (H0846-003)	PFFS *	\$98.00					
McCormick	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		_
McCormick	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00	Φ0.00	φU	Dasic		•
McCormick		Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		
McCormick	Humana Insurance Company Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
				\$81.00	\$29.30	\$0 \$0	Basic		•
McCormick McCormick	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002)	Regional PPO PFFS *	\$0.00	\$29.30	Φ0	Basic		•
	InStil Health Insurance Company	,		· · · · · · · · · · · · · · · · · · ·	# 00.00	C O	Di-		
McCormick	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic	Comodos	•
McCormick	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
McCormick	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
McCormick	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
McCormick	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20		4			
McCormick	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
McCormick	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
McCormick	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00			_		
McCormick	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	_	•
McCormick	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
McCormick	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
McCormick	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
McCormick	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
McCormick	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
McCormick	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•

" indicates plan doe	es not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated	Manuallala	A	D	T 6	Variable
			Town of Modicana	Premium	Monthly	Annual	Drug	Type of	Drug
	0 1 11 11	St. 14	Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Newberry	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Newberry	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Newberry	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		•
Newberry	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Newberry	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		•
Newberry	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Newberry	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Newberry	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Newberry	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Newberry	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Newberry	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Newberry	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Newberry	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Newberry	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Newberry	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Newberry	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Newberry	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Newberry	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Newberry	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Newberry	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Newberry	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.70	Ψισσ	Elinanoca		1
Newberry	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					1
Newberry	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		
Newberry	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Newberry	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	Ψ-1.50	ΨΟ	Lilianoca	GCHCHGS	1
Newberry	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Newberry	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		
Newberry	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00	\$11.00	ΦU	Ennanced		•
	1 /	,	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Newberry Oconee	Unicare Life & Health Ins. Company Advantra® Freedom	SecurityChoice Enhanced Plus (H0540-032) Freedom 3 (H0846-006)	PFFS *	\$0.00	\$20.70	ΦU	Ennanceu	Generics	•
	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		1
Oconee		, ,			\$0.00	\$0	Basic		•
Oconee	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00	# 40.00	C O	Falsassa		
Oconee	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Oconee	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Oconee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Oconee	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00		-			
Oconee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic	Commission	•
Oconee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Oconee	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Oconee	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Oconee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Oconee	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Oconee	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Oconee	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Oconee	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Oconee	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					ļ
Orangeburg	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Orangeburg	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Orangeburg	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00					
Orangeburg	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Orangeburg	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Orangeburg	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
			PFFS *	\$27.00				Ì	
Orangeburg	InStil Health Insurance Company	InStil InCare (H4204-022)	1110	Ψ21.00					

indicates plan doe	es not offer Part D drug coverage.								0.55
				Monthly					Offers
				Consolidated				Type of	Variable Drug
				Premium	Monthly	Annual	Drug		
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Orangeburg	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Orangeburg	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Orangeburg	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Orangeburg	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Orangeburg	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Orangeburg	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Orangeburg	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Orangeburg	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Orangeburg	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Orangeburg	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Pickens	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Pickens	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Pickens	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Pickens	Arcadian Health Plan	Greenville - Plus (H5783-006)	Local HMO	\$0.00	\$0.00	\$0	Enhanced	Generics	•
Pickens	Arcadian Health Plan	Greenville - Premier (H5783-007)	Local HMO	\$21.00	\$20.00	\$0	Enhanced	Generics	•
Pickens	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Pickens	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Pickens	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Pickens	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Pickens	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		
Pickens	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Pickens	Carolina Medicare Prime	Carolina Medicare Prime 15 (H4208-002)	Local HMO	\$0.00	\$0.00	\$265	Basic	Cononido	•
Pickens	Carolina Medicare Prime	Carolina Medicare Prime 15 Plus (H4208-009)	Local HMO	\$15.60	\$15.60	\$0	Enhanced	Generics	
Pickens	Carolina Medicare Prime	Carolina Medicare Prime 10 (H4208-001)	Local HMO	\$35.30	\$28.50	\$265	Basic	Cononido	•
Pickens	Carolina Medicare Prime	Carolina Medicare Prime 10 Plus (H4208-008)	Local HMO	\$50.90	\$44.10	\$0	Enhanced	Generics	<u> </u>
Pickens	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced	Generies	<u> </u>
Pickens	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		<u> </u>
Pickens	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		
Pickens	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	Ψ29.30	ΨΟ	Dasic		
Pickens	InStill Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
Pickens	InStill Health Insurance Company	InStil InChoice Option II - Regional (R5553-001)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	
Pickens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00	φ55.50	φυ	Ellianceu	Genetics	•
Pickens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 5 (H5435-003)	PFFS	\$10.00	\$10.00	\$0	Enhanced		
FICKETIS	Secure Horizons Medicare Direct	Secure nonzons Medicare Direct RX Plan 54 (n5455-015)	PFFS	\$10.00	\$10.00	Φ0	Ennanceu		•
Dialrana	Ciarra Ontina	Ciarra Ontima (LI4440 040)	PFFS *	\$53.10					
Pickens Pickens	Sierra Optima Sierra Optima	Sierra Optima (H4449-010) Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
		, ,							
Pickens	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	#00.70	# 400	Falsassa		
Pickens	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Pickens	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00					-
Pickens	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00	#40.00	* 0	D		-
Pickens	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic	Companies	•
Pickens	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Pickens	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Pickens	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00	****	-	.		
Pickens	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Pickens	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Pickens	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Richland	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Richland	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Richland	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Richland	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00					
Richland	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-002)	Local PPO	\$33.00	\$32.90	\$0	Basic		•
Richland	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-005)	Local PPO	\$50.00	\$37.50	\$0	Basic		•
Richland	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•

County Richland	Organization Name BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company Sterling Life Insurance Company	Plan Name Platinum Advantage - Plan 4 (H4207-001) Platinum Advantage - Plan 3 (H4207-002) Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option II - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima Plus (H4449-003)	Type of Medicare Health Plan Local PPO Local PPO Local PPO Local PPO Local HMO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO Regional PPO Regional PPO PFFS * PFFS * PFFS * PFFS * PFFS *	Monthly Consolidated Premium (Includes Part C + D) \$28.00 \$48.00 \$69.00 \$81.00 \$0.00 \$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$81.00 \$0.00 \$0.00 \$0.00	Monthly Drug Premium \$28.00 \$43.10 \$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	Annual Drug Deductible \$0 \$0 \$0 \$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Drug Benefit Type Basic Basic Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Enhanced Basic	Type of Extra Coverage Offered in the Gap Generics Generics Generics Generics	Offers Variable Drug Co- payments
Richland Richland	BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 4 (H4207-001) Platinum Advantage - Plan 3 (H4207-002) Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Health Plan Local PPO Local PPO Local PPO Local PPO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO Regional PPO Regional PPO RefFS * PFFS *	Premium (Includes Part C + D) \$28.00 \$48.00 \$69.00 \$81.00 \$15.60 \$35.30 \$50.90 \$19.00 \$31.00 \$0.00 \$0.00 \$0.00	Drug Premium \$28.00 \$43.10 \$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	Drug Deductible \$0 \$0 \$0 \$0 \$0 \$0 \$265 \$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0 \$0	Benefit Type Basic Basic Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Basic	Extra Coverage Offered in the Gap Generics Generics Generics	Drug Copayments
Richland Richland	BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 4 (H4207-001) Platinum Advantage - Plan 3 (H4207-002) Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Health Plan Local PPO Local PPO Local PPO Local PPO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO Regional PPO Regional PPO RefFS * PFFS *	(Includes Part C + D) \$28.00 \$48.00 \$69.00 \$81.00 \$0.00 \$15.60 \$35.30 \$50.90 \$19.00 \$31.00 \$0.00 \$0.00 \$0.00	Drug Premium \$28.00 \$43.10 \$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	Drug Deductible \$0 \$0 \$0 \$0 \$0 \$0 \$265 \$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0 \$0	Benefit Type Basic Basic Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Basic	Extra Coverage Offered in the Gap Generics Generics Generics	Co-payments
Richland Richland	BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 4 (H4207-001) Platinum Advantage - Plan 3 (H4207-002) Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Health Plan Local PPO Local PPO Local PPO Local PPO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO Regional PPO Regional PPO RefFS * PFFS *	Part C + D) \$28.00 \$48.00 \$69.00 \$81.00 \$15.60 \$35.30 \$50.90 \$19.00 \$81.00 \$0.00 \$53.00 \$53.00 \$53.00 \$50.00 \$50.00	Premium \$28.00 \$43.10 \$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	Deductible	Type Basic Basic Basic Basic Basic Basic Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Basic	Generics Generics Generics	payments
Richland Richland	BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 4 (H4207-001) Platinum Advantage - Plan 3 (H4207-002) Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local PPO Local PPO Local PPO Local PPO Local PPO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO Regional PPO Regional PPO PFFS * PFFS * PFFS * PFFS *	\$28.00 \$48.00 \$69.00 \$81.00 \$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$53.00 \$121.00 \$0.00	\$28.00 \$43.10 \$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	\$0 \$0 \$0 \$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0	Basic Basic Basic Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Basic	Generics Generics Generics	•
Richland Richland	BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 3 (H4207-002) Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-003) Platinum Advantage - Plan 1 (H4208-002) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local PPO Local PPO Local PPO Local PPO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO PFFS * PFFS * PFFS *	\$48.00 \$69.00 \$81.00 \$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$53.00 \$121.00 \$0.00	\$43.10 \$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	\$0 \$0 \$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0	Basic Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Basic	Generics Generics	•
Richland Richland	BlueChoice HealthPlan BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 2 (H4207-003) Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local PPO Local PPO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO PFFS* Regional PPO Regional PPO Regional PPO PFFS* PFFS * PFFS * PFFS * PFFS *	\$69.00 \$81.00 \$0.00 \$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$81.00 \$53.00 \$121.00 \$0.00	\$43.10 \$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30 \$39.90	\$0 \$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0 \$0	Basic Enhanced Basic Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Basic Basic	Generics Generics	•
Richland Richland	BlueChoice HealthPlan Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Platinum Advantage - Plan 1 (H4207-005) Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 Plus (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) Humana Choice PPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local PPO Local HMO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO Regional PPO PFFS * PFFS * PFFS *	\$81.00 \$0.00 \$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$81.00 \$53.00 \$121.00 \$0.00	\$54.80 \$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	\$0 \$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0	Enhanced Basic Enhanced Basic Enhanced Enhanced Enhanced Enhanced Basic Basic	Generics Generics	•
Richland Richland	Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Carolina Medicare Prime 15 (H4208-002) Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local HMO Local HMO Local HMO Local HMO PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO Refis * PFFS * PFFS * PFFS *	\$0.00 \$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$81.00 \$53.00 \$121.00 \$0.00	\$0.00 \$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	\$265 \$0 \$265 \$0 \$0 \$0 \$0 \$0	Basic Enhanced Basic Enhanced Enhanced Enhanced Basic Basic	Generics Generics	•
Richland Richland	Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Carolina Medicare Prime 15 Plus (H4208-009) Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local HMO Local HMO Local HMO PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO Refinal PPO PFFS * PFFS *	\$15.60 \$35.30 \$50.90 \$19.00 \$39.00 \$81.00 \$0.00 \$53.00 \$121.00 \$0.00	\$15.60 \$28.50 \$44.10 \$19.00 \$24.80 \$29.30	\$0 \$265 \$0 \$0 \$0 \$0 \$0	Enhanced Basic Enhanced Enhanced Enhanced Basic Basic	Generics	•
Richland Richland	Carolina Medicare Prime Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company InStiil Health Insurance Company InStiil Health Insurance Company InStiil Health Insurance Company InStiil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Carolina Medicare Prime 10 (H4208-001) Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local HMO Local HMO PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO Regional PPO PFFS * PFFS *	\$35.30 \$50.90 \$19.00 \$39.00 \$81.00 \$0.00 \$53.00 \$121.00 \$0.00	\$28.50 \$44.10 \$19.00 \$24.80 \$29.30	\$265 \$0 \$0 \$0 \$0 \$0	Basic Enhanced Enhanced Enhanced Basic	Generics	•
Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland	Carolina Medicare Prime Humana Insurance Company Humana Insurance Company Humana Insurance Company Instil Health Insurance Company Instil Health Insurance Company Instil Health Insurance Company Instil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sterling Life Insurance Company	Carolina Medicare Prime 10 Plus (H4208-008) Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Local HMO PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO Regional PPO PFFS * PFFS * PFFS *	\$50.90 \$19.00 \$39.00 \$81.00 \$0.00 \$53.00 \$121.00 \$0.00	\$44.10 \$19.00 \$24.80 \$29.30 \$39.90	\$0 \$0 \$0 \$0 \$0	Enhanced Enhanced Enhanced Basic		•
Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland	Humana Insurance Company Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008) Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	PFFS PFFS Regional PPO PFFS * Regional PPO Regional PPO PFFS * PFFS * PFFS *	\$19.00 \$39.00 \$81.00 \$0.00 \$53.00 \$121.00 \$0.00	\$19.00 \$24.80 \$29.30 \$39.90	\$0 \$0 \$0 \$0	Enhanced Enhanced Basic Basic		•
Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland	Humana Insurance Company Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225) HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	PFFS Regional PPO PFFS * Regional PPO Regional PPO PFFS * PFFS * PFFS *	\$39.00 \$81.00 \$0.00 \$53.00 \$121.00 \$0.00	\$24.80 \$29.30 \$39.90	\$0 \$0 \$0	Enhanced Basic Basic	Generics	•
Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland Richland	Humana Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004) InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Regional PPO PFFS * Regional PPO Regional PPO PFFS * PFFS *	\$81.00 \$0.00 \$53.00 \$121.00 \$0.00	\$29.30 \$39.90	\$0 \$0	Basic Basic	Generics	•
Richland Richland Richland Richland Richland Richland Richland Richland Richland	InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	InStil InCare (H4204-002) InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	PFFS * Regional PPO Regional PPO PFFS * PFFS *	\$0.00 \$53.00 \$121.00 \$0.00 \$0.00	\$39.90	\$0	Basic	Generics	•
Richland Richland Richland Richland Richland Richland Richland Richland	InStil Health Insurance Company InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	InStil InChoice Option I - Regional (R5553-001) InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Regional PPO Regional PPO PFFS * PFFS *	\$53.00 \$121.00 \$0.00 \$0.00				Generics	
Richland Richland Richland Richland Richland Richland Richland Richland	InStil Health Insurance Company SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	InStil InChoice Option II - Regional (R5553-002) SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	Regional PPO PFFS * PFFS * PFFS *	\$121.00 \$0.00 \$0.00				Generics	
Richland Richland Richland Richland Richland Richland	SecureHorizons MedicareDirect SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	SecureHorizons MedicareDirect Plan 10 (H5435-010) SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	PFFS * PFFS * PFFS *	\$0.00 \$0.00	\$53.50	\$0	Ennanced	Generics	•
Richland Richland Richland Richland	SecureHorizons MedicareDirect Sierra Optima Sierra Optima Sterling Life Insurance Company	SecureHorizons MedicareDirect Plan 3 (H5435-003) Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	PFFS * PFFS *	\$0.00				1	
Richland Richland Richland	Sierra Optima Sierra Optima Sterling Life Insurance Company	Sierra Optima (H4449-006) Sierra Optima Plus (H4449-003)	PFFS *						
Richland Richland	Sierra Optima Sterling Life Insurance Company	Sierra Optima Plus (H4449-003)							
Richland	Sterling Life Insurance Company			\$81.40					
			PFFS *	\$149.20					└
Richland		Sterling Option I (H5006-011)	PFFS *	\$9.00					└
		Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Richland	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
Richland	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
Richland	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
Richland	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Richland	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Richland	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Richland	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Richland	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Saluda	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					└
Saluda	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Saluda	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Saluda	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Saluda	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Saluda	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Saluda	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Saluda	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Saluda	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Saluda	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Saluda	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Saluda	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Saluda	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00					
Saluda	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Saluda	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Saluda	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Saluda	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Rx Plan 55 (H5435-014)	PFFS	\$10.30	\$10.30	\$265	Basic		
Saluda	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40			İ		
Saluda	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20			İ		
Saluda	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Saluda	Today's Option	Today's Options Premier (H5421-039)	PFFS *	\$0.00	Ψ=3.70	Ψ.00			
Saluda	Today's Option	Today's Options Value (H5421-038)	PFFS *	\$0.00					
Saluda	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic		
Saluda	Today's Option	Today's Options Premier Plus (H5421-044)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Saluda	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00	ψ -1 30	ΨΟ	Limanced	OCHERCS	─ •

" indicates plan do	es not offer Part D drug coverage.								011
				Monthly					Offers
				Consolidated					Variable
				Premium	Monthly	Annual	Drug	Type of	Drug
			Type of Medicare	(Includes	Drug	Drug	Benefit	Extra Coverage	Co-
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	payments
Saluda	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Saluda	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Saluda	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Saluda	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Spartanburg	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Spartanburg	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Spartanburg	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Spartanburg	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		•
Spartanburg	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00					
Spartanburg	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		•
Spartanburg	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Spartanburg	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Spartanburg	BlueChoice HealthPlan	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Spartanburg	BlueChoice HealthPlan	Platinum Advantage - Plan 2 (H4207-003)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Spartanburg	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Spartanburg	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Spartanburg	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		
Spartanburg	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Spartanburg	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	Ψ20.00	Ψΰ	Baoio		
Spartanburg	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
Spartanburg	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-001)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Spartanburg	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00	ψ55.50	ΨΟ	Lilianceu	Generics	-
Spartanburg	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10			1		
Spartanburg	Sierra Optima Sierra Optima	Sierra Optima (H4449-002)	PFFS *	\$121.20		-	-		
			PFFS *	\$9.00					
Spartanburg Spartanburg	Sterling Life Insurance Company Sterling Life Insurance Company	Sterling Option I (H5006-011) Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		
	Ů ,	0 1 1 7			\$28.70	\$100	Ennanced		•
Spartanburg	Today's Option	Today's Options Premier (H5421-039) Today's Options Value (H5421-038)	PFFS *	\$0.00 \$0.00					
Spartanburg	Today's Option				# 40.00	C O	D i .		
Spartanburg	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	\$10.00	\$10.00	\$0	Basic	Commission	•
Spartanburg	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	\$45.00	\$44.90	\$0	Enhanced	Generics	•
Spartanburg	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Spartanburg	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00	4				
Spartanburg	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Spartanburg	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Spartanburg	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Spartanburg	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Spartanburg	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Spartanburg	WellCare	Summit (H1340-010)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
Statewide	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Statewide	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Statewide	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Sumter	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Sumter	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Sumter	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-002)	PFFS *	\$32.00					
Sumter	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
Sumter	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
Sumter	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
Sumter	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•
Sumter	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	7	7-			
Sumter	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	
Sumter	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20	ψ00.00	ΨU	Limanoca	55.101105	1
Sumter	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced	<u> </u>	•
Sumter	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00	Ψ20.10	ψισο	Limanced	<u> </u>	•
Sumter	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	1	1	 	1	1
Juiillei	Trouay & Option	Trouay & Options Fremier (113421-037)	Frrə	φου.υυ	1	<u> </u>	1		1

indicates plan do	oes not offer Part D drug coverage.			Monthly					Offers
				Monthly Consolidated					
					Monthly	Annual	Drug	Type of Extra Coverage	Variable Drug Co-
			Type of Medicare	Premium (Includes	Drug	Drug	Benefit		
County	Organization Name	Plan Name	Health Plan	Part C + D)	Premium	Deductible	Type	Offered in the Gap	
Sumter	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic	Offered III the Gap	• payments
Sumter	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Sumter	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00	ψ44.30	ΨΟ	Lillanceu	Generics	<u> </u>
Sumter	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
Union	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS*	\$0.00					
Union	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
Union	Blue Cross Blue Shield of South Carolina	Medicare Blue (H4209-001)	Local PPO	\$0.00	\$0.00	\$0	Basic		•
Union	Blue Cross Blue Shield of South Carolina	Medicare Blue Private (H4205-001)	PFFS *	\$0.00	Ψ0.00	ΨΟ	Dasic		
Union	Blue Cross Blue Shield of South Carolina	Medicare Blue Plus (H4209-004)	Local PPO	\$17.00	\$17.00	\$0	Basic		•
Union	BlueChoice HealthPlan	Platinum Advantage - Plan 5 (H4207-004)	Local PPO	\$18.00	\$18.00	\$0	Basic		•
Union	BlueChoice HealthPlan	Platinum Advantage - Plan 4 (H4207-001)	Local PPO	\$28.00	\$28.00	\$0	Basic		•
Union	BlueChoice Health Ian	Platinum Advantage - Plan 3 (H4207-002)	Local PPO	\$48.00	\$43.10	\$0	Basic		•
Union	BlueChoice Health Ian	Platinum Advantage - Plan 2 (H4207-002)	Local PPO	\$69.00	\$43.10	\$0	Basic		•
Union	BlueChoice HealthPlan	Platinum Advantage - Plan 1 (H4207-005)	Local PPO	\$81.00	\$54.80	\$0	Enhanced	Generics	•
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic	Genetics	
Union	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS	\$89.00	\$29.30	\$0	Enhanced		
Union	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	PFFS	\$109.00	\$24.60	\$0	Enhanced		•
Union	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	\$24.00	\$0	Ennanceu		•
Union	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		
	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-001)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	<u> </u>
Union	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$121.00	\$53.50	\$0	Ennanced	Genencs	•
Union	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00	-	1			
Union			PFFS	\$9.00	¢20.70	¢100	Enhanced		_
Union	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS *	\$28.70 \$12.00	\$28.70	\$100	Enhanced		•
Union	Today's Option	Today's Options Value (H5421-035)							
Union	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00	\$31.90	\$0	Di-		
Union	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00 \$80.00			Basic	Comorino	•
Union	Today's Option	Today's Options Premier Plus (H5421-043)	MSA *	\$80.00	\$44.90	\$0	Enhanced	Generics	•
Union	UniCare	Save Well - Plan II (H7289-002)	PFFS *	\$0.00					
Union	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)		· · · · · · · · · · · · · · · · · · ·	C44.00	C O	Fahanad		
Union	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS *	\$11.00 \$25.00	\$11.00	\$0	Enhanced		•
Union	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)			\$00.70	C O	Fahanad	Comorino	
Union	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0 ©0	Enhanced	Generics	•
Williamsburg	ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00 \$81.00	\$0.00	\$0 \$0	Basic Basic		•
Williamsburg	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO		\$29.30				•
Williamsburg	Humana Insurance Company	Humana Gold Choice PFFS H1804-018 (H1804-018)	PFFS PFFS	\$89.00	\$22.80	\$0 ©0	Enhanced		•
Williamsburg	Humana Insurance Company	Humana Gold Choice PFFS H1804-226 (H1804-226)	Regional PPO	\$109.00 \$53.00	\$24.60 \$39.90	\$0 \$0	Enhanced Basic		•
Williamsburg	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)			\$39.90	\$0	Basic		•
Williamsburg	InStil Health Insurance Company	InStil InCare (H4204-003)	PFFS *	\$61.00	ΦEΩ ΕΩ	ro.	Fabonesal	Comorino	
Williamsburg	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
Williamsburg	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Williamsburg	Sterling Life Insurance Company	Sterling Option I (H5006-011)		\$9.00	#00.70	£400	Enhanced		
Williamsburg	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Williamsburg	Today's Option	Today's Options Value (H5421-032)	PFFS *	\$48.00					
Williamsburg	Today's Option	Today's Options Premier (H5421-034)	PFFS *	\$72.00	CO4.00	C O	Di-		
Williamsburg	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	\$80.00	\$31.90	\$0 ©0	Basic	Consular	•
Williamsburg	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	\$117.00	\$44.90	\$0	Enhanced	Generics	•
Williamsburg	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
York	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00	#0.00	# 0	D:-		
York	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	\$0.00	\$0.00	\$0	Basic		•
York	Humana Insurance Company	Humana Gold Choice PFFS H1804-008 (H1804-008)	PFFS	\$19.00	\$19.00	\$0	Enhanced		•
York	Humana Insurance Company	Humana Gold Choice PFFS H1804-225 (H1804-225)	PFFS	\$39.00	\$24.80	\$0	Enhanced		•
York	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	\$81.00	\$29.30	\$0	Basic		•
York	InStil Health Insurance Company	InStil InCare (H4204-002)	PFFS *	\$0.00	<u> </u>	ļ			Į.
York	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	\$53.00	\$39.90	\$0	Basic		•

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co- payments
York	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	\$121.00	\$53.50	\$0	Enhanced	Generics	•
York	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
York	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
York	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
York	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
York	Today's Option	Today's Options Value (H5421-035)	PFFS *	\$12.00					
York	Today's Option	Today's Options Premier (H5421-037)	PFFS *	\$35.00					
York	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	\$44.00	\$31.90	\$0	Basic		•
York	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	\$80.00	\$44.90	\$0	Enhanced	Generics	•
York	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
York	WellCare	Duet (H1340-002)	PFFS *	\$0.00					
York	WellCare	Concert (H1340-016)	PFFS	\$109.00	\$49.70	\$0	Enhanced		•